SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE	1	49 OF		897
(check only one)									
X	11a		11b		11c		12		
	13		14		15		16		17

	d Statements may not be sold or used by any pers the name and address of any political committee to		
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	Insurance Company Federal PAC		
Full Name (Last, First, Middle Initial) A. Blane Dexheimer Mailing Address 350 Sheffield Dr City Brookfield	Date of Receipt 12 31 2015 Transaction ID: 2015122919835-530 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee. Name of Employer NML Receipt For: Primary General Other (specify)	Occupation Director Aggregate Year-to-Date ▼ 300.00	13.00	
Full Name (Last, First, Middle Initial) Paul Dodd Mailing Address 7078 E Genesee St City City	State Zip Code	Date of Receipt M	
Fayetteville FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify)	NY 13066-1123 C Occupation General Insurance Agent Aggregate Year-to-Date ▼ 4992.00	Amount of Each Receipt this Period 208.00	
Full Name (Last, First, Middle Initial) Paul Dodd Mailing Address 7078 E Genesee St City Fayetteville FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify)	State Zip Code NY 13066-1123 C Occupation General Insurance Agent Aggregate Year-to-Date ▼ 4992.00	Date of Receipt O7 31 2015 Transaction ID: 2015073119750-26 Amount of Each Receipt this Period 208.00	
SUBTOTAL of Receipts This Page (optional)	>	429.00	
TOTAL This Period (last page this line numb	er only)		